

SUPERIOR COURT OF WASHINGTON COUNTY OF _____
IN THE MATTER OF: _____
CHILD'S FULL NAME _____
BIRTHDATE _____
TRIBE(S)/BAND(S) _____

LEGAL NO: _____

ADDENDUM TO PETITION FOR AN INDIAN CHILD

The following information is to be filed with the Superior Court with a dependency, guardianship, or termination petition pursuant to an agreement for the delivery of Indian child welfare services between the federally recognized Indian Tribes of the State of Washington and the Department of Social and Health Services.

1. I, _____, hereby declare:

1.1 Name of the Indian child: _____

Date of birth: _____ Last known address: _____

1.2 Name of child's mother: _____

Address of child's mother: _____

Name of child's father: _____

Address of child's father: _____

Name of Indian custodian: _____

Efforts made to locate parents/Indian custodian if the identity or whereabouts of such person are unknown:

DISTRIBUTION: Attach to the petition; Service file; Indian Child's parents; Indian Child's

1.3 The child: _____

☐ Is a member of the _____ Tribe. The Tribe's address:

☐ Is eligible for membership in the _____
Tribe and is the birth child of a tribal member.

The Tribe's address is: _____

☐ Is of Indian ancestry and may be a member of or eligible for membership in a federally
recognized Indian Tribe. Further efforts will be made by the petitioner to ascertain whether the
child is an Indian child as defined by the Indian Child Welfare Act. The following efforts have
been made to verify whether the child is Indian and to identify the tribal affiliation of the child and
the parents/Indian custodian:

1.4 Tribal affiliation of child's mother: _____

Tribal affiliation of child's father: _____

Tribal affiliation of child's Indian custodian: _____

1.5 ☐ The child's residence/domicile **is** located within the reservation boundaries of the
_____ Tribe.

☐ The child's residence/domicile **is not** located within the boundaries of an Indian reservation.

☐ There is not enough information available at this time to determine whether the child's
residence/domicile is within an Indian reservation.

1.6 The position of the child's Tribe regarding the child's residence/domicile (if known):

1.7 ☐ The child ☐ is ☐ is not the subject of any Tribal Court custody order. A copy of each such
order is attached.

☐ The child ☐ is ☐ is not a ward of Tribal Court.

☐ There is not enough information available at this time to determine if the child is a Tribal Court
ward.

DISTRIBUTION: Attach to the petition; Service file; Indian Child's parents; Indian Child's
Tribe

1.8 A specific and detailed account of the circumstances that led to filing the petition:

1.9 A statement of specific active efforts made to provide remedial and rehabilitative services designed to prevent the break-up of the Indian family (attach documentation of services provided):

A statement as to whether those efforts proved unsuccessful and the reasons for lack of success:

2. The child ☐ is ☐ is not in shelter care placement (provide the information requested below only if the child has been placed in shelter care.

2.1 A specific and detailed account of the circumstances that led the service worker to seek shelter care placement:

2.2 Reasons why the child has not been transferred to the jurisdiction of his/her Tribe:

2.3 The child's Tribe ☐ has ☐ has not concurred in the dependency petition. The believed basis for the Tribe's concurrence/lack of concurrence:

2.4 A statement of the "reasonable efforts" made to prevent placement:

2.5 A statement of the specific actions that have been taken or will be taken to assist the parents or Indian custodian to obtain the return of the child to their custody:

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signed at _____, Washington,

Dated this _____ day of _____, _____ at _____, Washington.
DAY MONTH YEAR CITY

DECLARANT

ADDRESS

CITY

STATE

ZIP CODE

DISTRIBUTION: Attach to the petition; Service file; Indian Child's parents; Indian Child's Tribe